

FAX RECEIVED

ROTHWELL, FIGG, ERNST & MANBECK

JUN 09 2003

Suite 800
1425 K Street, N.W.
Washington, D.C. 20005

GROUP 1600

Telephone: (202)783-6040
Telefax: (202)783-6031

FACSIMILE TRANSMITTAL SHEET

OFFICIAL

DATE: June 6, 2003
TO: Examiner B. Sisson
United States Patent and Trademark Office
Amendment After Final
FACSIMILE: (703) 872-9307
FROM: Michael J. Moran, Ph.D.
APPLICATION #: 09/529,967

Certification of Facsimile Transmission
I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.
Sonia Thompson
Type or print name of person signing certification
Sonia Thompson 6-6-03
Signature Date

THIS MESSAGE IS INTENDED FOR THE USE OF THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT OR THE EMPLOYEE OR AGENCY RESPONSIBLE FOR DELIVERING THE MESSAGE TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICES. THANK YOU.

Number of Pages Including This Transmittal Sheet: 12

If any problems in connection with this facsimile, please contact: Sonia at 202-783-6031.

MESSAGE, IF ANY:

MAIL STOP AF

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		<i>Complete if Known</i>	
		Application Number	09/529,967
		Filing Date	24 April 2000
		First Named Inventor	Matti KORPELA
		Examiner Name	B. Sisson
Group Art Unit	1634		
Total Number of Pages in This Submission	Attorney Docket Number	2328-117	

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

REMARKS:

SUBMITTED BY		Complete (if applicable)		
NAME AND REG. NUMBER	Michael J. Moran, Ph.D., Reg. No. 42,013			
SIGNATURE		DATE	6/6/03	DEPOSIT ACCOUNT USER ID

FEE TRANSMITTAL for FY 2003 (Small Entity)		Complete If Known	
		Application Number	09/529,967
		Filing Date	24 April 2000
		First Named Inventor	Matti KORPELA
		Examiner Name	B. Sisson
Group Art Unit	1634		
Total Amount of Payment	(\$205.00)	Attorney Docket Number	2328-117

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge additional fees and credit any overpayment to Deposit Account Number 02-2135 in the name of Rothwell, Figg, Ernst & Manbeck

Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status.

2. Payment Enclosed:
 Check
 Credit Card

FEE CALCULATION**1. FILING FEE**

Fee	Fee	Fee Description	Fee Paid
Code	\$		
2001	375	Utility Filing Fee	[]
2002	165	Design Filing Fee	[]
2003	260	Plant Filing Fee	[]
2004	375	Reissue Filing Fee	[]
2005	80	Provisional Filing Fee	[]

SUBTOTAL

\$

2. CLAIMS

Total Claims	Independent	Extra Claims	Fee	Fee Paid
[]	- 20**	= []	x \$ 9 =	[]
Claims	[]	- 3**	= []	42 = []
Mult ple Dependent Claims	[]	+	140 = []	

**or number previously paid, if greater;

SUBTOTAL

\$

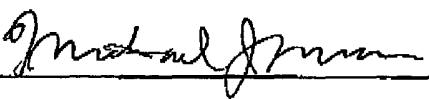
FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Fee Code	Fee Paid	Fee Description	Fee Paid
2051	65	Surcharge - late filing fee or oath	[]
2052	25	Surcharge - late provisional filing fee or cover sheet	[]
1053	130	Non-English specification	[]
1812	2,520	For filing a request for reexamination	[]
1804	920	Requesting publication of SIR prior to Examiner action	[]
1805	1,840*	Requesting publication of SIR after Examiner action	[]
2251	55	Extension for reply within first month	[]
2252	205	Extension for reply within second month	[205.00]
2253	465	Extension for reply within third month	[]
2254	725	Extension for reply within fourth month	[]
2255	985	Extension for reply within fifth month	[]
2401	160	Notice of Appeal	[]
2402	160	Filing a brief in support of an appeal	[]
2403	150	Request for Oral Hearing	[]
2451	1,510	Petition to Institute a public use proceeding	[]
2452	55	Petition to revive -unavailable	[]
2453	650	Petition to revive - unintentional	[]
2501	650	Utility issue fee (or reissue)	[]
2502	235	Design issue fee	[]
2503	315	Plant issue fee	[]
1460	130	Petitions to the Commissioner	[]
1807	50	Processing fee under 37 CFR 1.17(q)	[]
1806	180	Submission of Information Disclosure Statement	[]
8021	40	Recording each patent assignment per property (times number of properties)	[]
2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	[]
2810	375	For each additional invention to be examined (37 CFR 1.129(b))	[]
2801	375	Request for Continued Examination (RCE)	[]
1802	900	Request for expedited examination of a design application	[]
1504	300	Publication fee for early, voluntary, or normal publication	[]
1505	300	Publication fee for republication	[]
1455	200	Filing an application for patent term adjustment	[]
1456	400	Request for reinstatement of term reduced	[]
Other fee (specify)			

* Reduced by Basic Filing Fee Paid

SUBTOTAL

\$205.00

SUBMITTED BY		Complete (if applicable)		
NAME AND REG. NUMBER	Michael J. Moran, Ph.D., Reg. No. 42,013			
SIGNATURE		DATE	6/6/03	DEPOSIT ACCOUNT USER ID

MAIL STOP AF	
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE	Application No. 09/529,967 Filing Date 24 April 2000 First Named Inventor Matti KORPELA et al. Group Art Unit 1634 Examiner Name B. Sisson Attorney Docket No. 2328-117
<i>Title of the Invention:</i> TETRACYCLINE ASSAY METHOD	

AMENDMENT AFTER FINAL
MS AF

U.S. Patent and Trademark Office
 2011 South Clark Place
 Customer Window, Mail Stop AF
 Crystal Plaza Two, Lobby, Room 1B03
 Arlington, VA 22202

Dear Sir:

Certification of Facsimile Transmission

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Sonia Thompson
 Type or print name or person signing certification
Sonia Thompson
 Signature 6-6-03
 Date

INTRODUCTORY COMMENTS

In response to the final Office Action mailed 07 January 2003, please amend the above-identified application as follows.

IN THE CLAIMS:

Please amend claims 1, 3 and 5 as found on the following pages.

Material inserted is indicated by underlining and material deleted is indicated by strikeout of the deleted text.